

Organization ID # 0023396
State of origin KY
Filing fee \$175.00

Commonwealth of Kentucky
Alison Lundergan Grimes, Secretary of State

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NPRF
Alison Lundergan Grimes
Kentucky Secretary of State
Received and Filed:
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Fee Receipt: \$175.00

Alison Lundergan Grimes
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

**Reinstatement Application and
Reinstatement Annual Report**
For the years 2012 through 2016

RST

Exact organization name and principal office address

HOLIDAY PARK ASSOCIATION, INC.
3811 NASSAU CIRCLE
HOPKINSVILLE KY 42240

The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.

Registered Agent and Registered Office Address

JESSICA SHEPARD
3811 NASSAU CIRCLE
HOPKINSVILLE, KY 42240



Principal Officers - List the name, address and title of all current officers. All organizations must list at least one (1) officer, even in the case of a sole officer. If not specified, officer addresses default to the principal office address. Corporations are required to list a Secretary or other officer serving as records custodian

President FAYE OGLESBY
Treasurer TRUDY THOMPSON

Directors - Non-profit corporations must have at least three (3) directors. All directors of the non-profit must be listed. If not specified, director addresses default to the principal office address.

DOROTHY NEWCOMB
TOMMY KING
TERESA BURNSIDE

The above entity was administratively dissolved on September 11, 2012 because the entity did not file its annual report for the year 2012. The undersigned states that the grounds for dissolution either did not exist or have been eliminated, and the entity's name satisfies the requirements of KRS 273.3181. Enclosed is a check in the amount of \$175.00, payable to Kentucky State Treasurer.

Under penalty of perjury, the below signed hereby authorizes the Kentucky Department of Revenue to release any applicable tax information pertaining to HOLIDAY PARK ASSOCIATION, INC. to the Secretary of State, as required for reinstatement pursuant to KRS 271B.14-220.

If not an officer of said entity, please provide a Declaration of Power of Attorney with the Reinstatement Application.

X Faye Oglesby President 5/20/16
Signature of officer or chairman of the board (Required) Title (Required) Date (Required)



DANIEL P. BORK
Commissioner

**FINANCE AND ADMINISTRATION CABINET
DEPARTMENT OF REVENUE
OFFICE OF INCOME TAXATION**

ELYSE WEIGEL
Deputy Commissioner

August 1, 2016

**HOLIDAY PARK ASSOCIATION, INC.
3811 NASSAU CIRCLE
HOPKINSVILLE KY 42240**

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **HOLIDAY PARK ASSOCIATION, INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2015, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Mickey Rev3921, Revenue Auditor I
Division of Corporation Tax
501 High Street, Mail Sta. 52
Frankfort, KY 40601
502-564-7310
FAX# 502-564-0058

Kentucky Secretary of State organization number 0023396